

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JB		06-06-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	FR	1018	7-06-01
RESPONSE FORMALITY REVIEW	SIC	809	10-16-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	
Original	
1	✓✓✓
2	✓✓✓
3	✓✓✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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